

PLEASE TYPE OR PRINT

NAME OF TAXPAYER

FEDERAL EMPLOYER IDENTIFICATION NUMBER

NUMBER & STREET ADDRESS

ADDRESS (continued)

CITY/TOWN, STATE & ZIP CODE

1 Annual Private Car Tax (from Line 5 of Tax Bill)		1
2 Payments:		
(a) Payments from estimated taxes	2(a)	
(b) Credit carryover from prior year or other payments	2(b)	
Enter the sum of Lines 2(a) through 2(b)		2
3 Balance of Tax Due (Line 1 minus Line 2)		3
4 Additions to Tax:		
(a) Interest	4(a)	
(b) Failure to Pay	4(b)	
(c) Failure to File	4(c)	
(d) Underpayment of Estimated Tax	4(d)	
Enter the sum of Lines 4(a) through 4(d)		4
5 Net Balance Due (Line 3 plus Line 4)	PAY THIS AMOUNT →	5
6 Overpayment (Line 2 minus Line 1 plus Line 4, if applicable)	6	
7 Amount of Line 6 to be applied to:		
(a) 2007 tax liability	DO NOT PAY →	7(a)
(b) Refund (Please allow 12 weeks for processing)		7(b)

Make check payable to: **State of New Hampshire**. If less than \$1.00 do not pay.

FOR DRA USE ONLY

Signature required below only if requesting a refund

SIGNATURE (IN INK) OF TAXPAYER

DATE

TITLE

NH DEPT OF REVENUE ADMINISTRATION
MAIL DOCUMENT PROCESSING DIVISION
TO: PO BOX 637
 CONCORD NH 03302-0637

PRIVATE CAR TAX RETURN

INSTRUCTIONS

WHO MUST FILE	Every corporation or company not a railroad company, owning any cars operated for profit on any railroad must file a Private Car return Form DP-111. Every railroad, railway, express and every parlor, sleeping or dining car corporation or company must file a Form DP-110, Railroad Tax Return.																		
WHEN TO FILE	The DP-111 is due on or before 15 days from date of Notice of Value and Tax Bill.																		
WHERE TO FILE	Mail the DP-111 to: NH Department of Revenue Administration, Document Processing Division, PO Box 637, Concord NH 03302-0637. FACSIMILE RETURNS ARE NOT ACCEPTED																		
ESTIMATED TAX DUE	Every corporation or company required to file a DP-111 must file a declaration of its estimated private car tax for the subsequent taxable period. One quarter of the private car estimated tax is due on April 15, June 15, September 15 and December 15. If any of these dates fall on a weekend or holiday, the estimate tax payment is due on the next business day. See the instructions with Form DP-2210/2220 for exceptions and penalties for noncompliance.																		
ROUNDING OFF	Money items on all Private Car Tax forms may be rounded off to the nearest whole dollar.																		
APPEALS	Hearings: A taxpayer may petition the Department for redetermination or reconsideration within 60 days after the Notice of Assessment by written application to the Department. A taxpayer may appeal the Department's redetermination or reconsideration within 30 days of the final order by written application to the Board of Tax and Land Appeals (BTLA). The BTLA shall determine the correctness of the Department's action de novo. Visit the BTLA on the web @ www.state.nh.us/btla . Appeal: The state or any corporation or company against whom a tax is assessed, if aggrieved by the decision of the BTLA may appeal to the supreme court pursuant to RSA 541, as amended.																		
CONFIDENTIAL INFORMATION	Tax information which is disclosed to the Department is held in strict confidence by law. The information may be disclosed to the United States Internal Revenue Service, agencies responsible for the administration of taxes in other states in accordance with compacts for the exchange of information, and as otherwise authorized by New Hampshire Revised Statutes Annotated 21-J:14.																		
NEED HELP OR FORMS	Call the New Hampshire Department of Revenue at (603) 271-2191, Monday through Friday 8:00 am - 4:30 pm. For forms please visit our web site @ revenue.nh.gov . Individuals with hearing or speech impairments may call TDD Access: Relay NH 1-800-735-2964.																		
LINE 1	This is the amount of the annual tax from Line 5 of the notice of value and notice of tax bill.																		
LINE 2(a)	Enter estimated payments to be applied to this year.																		
LINE 2(b)	Enter any other credits from prior years or other payments.																		
LINE 2	Enter the sum of Lines 2(a) and 2(b).																		
LINE 3	Enter the remainder of Line 1, minus Line 2 to calculate the subtotal of tax due.																		
LINE 4(a)	INTEREST: Interest is calculated on the balance of tax due from the original due date to the date paid at the applicable rate listed below. Tax due x number of days from due date to date tax was paid x daily rate decimal equivalent. $\text{Tax due} \times \text{Number of days} \times \text{Daily decimal rate equivalent} = \text{Interest due}$ <p>NOTE: The interest rate is recomputed each year under the provisions of RSA 21-J:28, II. Applicable rates are as follows:</p> <table border="1"> <thead> <tr> <th>PERIOD</th><th>RATE</th><th>DAILY RATE DECIMAL EQUIVALENT</th></tr> </thead> <tbody> <tr> <td>1/1/2007 - 12/31/2007</td><td>10%</td><td>.000274</td></tr> <tr> <td>1/1/2006 - 12/31/2006</td><td>8%</td><td>.000219</td></tr> <tr> <td>1/1/2005 - 12/31/2005</td><td>6%</td><td>.000164</td></tr> <tr> <td>1/1/2004 - 12/31/2004</td><td>7%</td><td>.000191</td></tr> <tr> <td>1/1/2003 - 12/31/2003</td><td>8%</td><td>.000219</td></tr> </tbody> </table> <p>(contact the Department for applicable rates for any other years)</p>	PERIOD	RATE	DAILY RATE DECIMAL EQUIVALENT	1/1/2007 - 12/31/2007	10%	.000274	1/1/2006 - 12/31/2006	8%	.000219	1/1/2005 - 12/31/2005	6%	.000164	1/1/2004 - 12/31/2004	7%	.000191	1/1/2003 - 12/31/2003	8%	.000219
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LINE 4(b)	FAILURE TO PAY: A penalty equal to 10% of any nonpayment or underpayment of taxes shall be imposed if the taxpayer fails to pay when due. If the failure to pay is due to fraud, the penalty shall be 50% of the amount of the nonpayment or underpayment.																		
LINE 4(c)	FAILURE TO FILE: A taxpayer failing to timely file a complete return may be subject to a penalty equal to 5% of the tax due (on Line 1) or \$10, whichever is greater, for each month or part thereof, that the return remains unfiled. The total amount of this penalty shall not exceed 25% of the balance of tax due (of Line 1) or \$50, whichever is greater. Calculate this penalty starting from the original due date of the return until the date a complete return has been filed.																		
LINE 4(d)	UNDERPAYMENT OF ESTIMATED TAXES: If Line 1 is more than \$200 you may have been required to file estimated payments during the tax year. To calculate your penalty for nonpayment or underpayment of estimates, or to determine if you qualify for an exception from filing estimate payments, complete and attach Form DP-2210/2220. Form DP-2210/2220 may be obtained by visiting our site @ revenue.nh.gov or by calling (603) 271-2192.																		
LINE 4	Enter the sum of Lines 4(a) through 4(d) to calculate the total additions to tax..																		
LINE 5	If the total tax (Line 1) plus interest and penalties (Line 4) is greater than the payments (Line 2) then enter the balance due. If less than \$1.00, do not pay, but still file the return. Make check or money order payable to: STATE OF NEW HAMPSHIRE . Payment must accompany the return. To ensure the check is credited to the proper account, please put the federal employer identification number on the check. Please enclose, but do not staple or tape, your payment with this return.																		
LINE 6	If your total tax (Line 1) plus interest and penalties (Line 4) is less than your payments (Line 2) then you have overpaid. Enter the amount on Line 6.																		
Lines 7(a) and 7(b)	The taxpayer has the option of applying any part of the overpayment or the total amount of the overpayment as a credit on its next year's tax liability. Enter the desired credit on Line 7(a). The remainder, which will be refunded, should be entered on Line 7(b). If Line 7(a) is not completed, then the entire overpayment will be refunded. Please allow 12 weeks for processing your refund.																		
SIGNATURES	The return must be signed in ink and dated by the taxpayer or authorized agent. If the return was completed by a paid preparer, the preparer must also sign in ink and date the return. The preparer must also enter their federal employer identification number or preparer tax identification number and their complete address.																		

1 WHO MUST PAY ESTIMATED TAX

Every corporation or company required to file a Private Car Tax return must also make an Estimated Private Car Tax payment for its subsequent taxable period, unless the annual estimated tax is less than \$200. However, quarterly payments are required to be made whenever your **annual** estimated tax for the subsequent taxable period equals or exceeds \$200. (See paragraph 6 for exceptions.)

2 WHERE TO FILE

Mail your estimated tax payments to:

NH Department of Revenue Administration
Document Processing Division
PO Box 637
Concord NH 03302-0637

3 WHEN TO MAKE ESTIMATED TAX PAYMENTS

1st Quarterly payment due April 17, 2007
2nd Quarterly payment due June 15, 2007
3rd Quarterly payment due September 17, 2007
4th Quarterly payment due December 17, 2007

4 PAYMENT OF ESTIMATED TAX

Estimated tax may be paid in full with the initial declaration or in equal installments on the due dates stated in paragraph 3. Make checks payable to State of New Hampshire.

5 UNDERPAYMENT PENALTIES

A penalty at the underpayment rate as determined from time to time pursuant to RSA 21-J:28,II, on the amount of the underpayment for the period of the underpayment. This penalty will not be imposed if any of the statutory exceptions apply. See Form DP-2210/2220.

6 EXCEPTIONS TO THE UNDERPAYMENT PENALTY

The penalty shall not apply if you meet one of the exceptions provided in RSA 21-J:32. Please use form DP-2210/2220 to see if you meet one of the exceptions or to compute the amount of the penalty. To obtain this form, visit our web site @ revenue.nh.gov or call our forms line at (603) 271-2192.

7 NEED HELP

Questions related to payments or additions to tax should be referred to the Document Processing Division at (603) 271-2191.

Questions not covered herein should be referred to Property Appraisal Division, 57 Regional Drive, Concord, NH 03301. Telephone number (603) 271-2687. Individuals who need auxiliary aids for effective communications in programs and services of the New Hampshire Department of Revenue Administration are invited to make their needs and preferences known. Individuals with hearing or speech impairments may call TDD Access: Relay NH 1-800-735-2964.

8 APPEAL RIGHTS

82:16-a Corporations or companies aggrieved by the determination by the commissioner relative to the tax assessed under this chapter may appeal such determination according to the procedures and subject to the time limits provided for other taxes administered by the department under RSA 21-J.

ESTIMATED PRIVATE CAR TAX - 2007**2007 TAXPAYER'S WORKSHEET – KEEP FOR YOUR RECORDS**

- 1 All Private Car Tax paid in 2006 1 _____
- 2 2006 OVERPAYMENT applied to 2007 taxes 2 _____
(If the overpayment exceeds the first 1/4 installment, the overage will be applied to the next installment and so on)
- 3 BALANCE OF ESTIMATED PRIVATE CAR TAX (Line 1 minus Line 2) 3 _____

COMPUTATION and RECORD of PAYMENTS

Date Paid	Amount of each Installment (1/4 of Line 3 of worksheet)	2006 Overpayment Applied to Installment	Balance Due	CALENDAR YEAR DUE DATES
1.	\$	\$	\$	April 17, 2007
2.	\$	\$	\$	June 15, 2007
3.	\$	\$	\$	Sept. 17, 2007
4.	\$	\$	\$	Dec. 17, 2007

IMPORTANT:

THE PENALTY PROVISIONS OF RSA 21-J:32 WILL APPLY IF THE ESTIMATE REQUIREMENTS HAVE NOT BEEN MET.

(Cut along this line)

Payment Form 1
Due April 17, 2007

ESTIMATED PRIVATE CAR TAX - 2007**QUARTERLY PAYMENT FORM**

FOR DRA USE ONLY

PLEASE PRINT OR TYPE

NAME OF TAXPAYER

FEDERAL EMPLOYER IDENTIFICATION
NUMBER

FOR DRA USE ONLY

NUMBER & STREET ADDRESS

ADDRESS (continued)

CITY/TOWN, STATE & ZIP CODE

MAIL
TO:

NH DEPT OF REVENUE ADMINISTRATION
DOCUMENT PROCESSING DIVISION
PO BOX 637
CONCORD NH 03302-0637

Amount Of This Payment**\$**

Make check or money order payable to: **STATE OF NEW HAMPSHIRE.**
Enclose, but do not staple or tape, your payment to this estimate.
Do not file a \$0 estimate.

FORM

DP-111-ES

112

**Payment Form 2
Due June 15, 2007**

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

**ESTIMATED PRIVATE CAR TAX - 2007
QUARTERLY PAYMENT FORM**

FOR DRA USE ONLY

PLEASE PRINT OR TYPE

NAME OF TAXPAYER

FEDERAL EMPLOYER IDENTIFICATION NUMBER

FOR DRA USE ONLY

NUMBER & STREET ADDRESS

ADDRESS (continued)

CITY/TOWN, STATE & ZIP CODE

MAIL
TO:NH DEPT OF REVENUE ADMINISTRATION
DOCUMENT PROCESSING DIVISION
PO BOX 637
CONCORD NH 03302-0637**Amount Of This Payment \$**Make check or money order payable to: **STATE OF NEW HAMPSHIRE.**
Enclose, but do not staple or tape, your payment to this estimate.
Do not file a \$0 estimate.DP-111-ES
Rev. 12/13/06

(Cut along this line)

FORM

DP-111-ES

112

**Payment Form 3
Due Sept. 17, 2007**

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

**ESTIMATED PRIVATE CAR TAX - 2007
QUARTERLY PAYMENT FORM**

FOR DRA USE ONLY

PLEASE PRINT OR TYPE

NAME OF TAXPAYER

FEDERAL EMPLOYER IDENTIFICATION NUMBER

FOR DRA USE ONLY

NUMBER & STREET ADDRESS

ADDRESS (continued)

CITY/TOWN, STATE & ZIP CODE

MAIL
TO:NH DEPT OF REVENUE ADMINISTRATION
DOCUMENT PROCESSING DIVISION
PO BOX 637
CONCORD NH 03302-0637**Amount Of This Payment \$**Make check or money order payable to: **STATE OF NEW HAMPSHIRE.**
Enclose, but do not staple or tape, your payment to this estimate.
Do not file a \$0 estimate.DP-111-ES
Rev. 12/13/06

(Cut along this line)

FORM

DP-111-ES

112

**Payment Form 4
Due Dec. 17, 2007**

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

**ESTIMATED PRIVATE CAR TAX - 2007
QUARTERLY PAYMENT FORM**

FOR DRA USE ONLY

PLEASE PRINT OR TYPE

NAME OF TAXPAYER

FEDERAL EMPLOYER IDENTIFICATION NUMBER

FOR DRA USE ONLY

NUMBER & STREET ADDRESS

ADDRESS (continued)

CITY/TOWN, STATE & ZIP CODE

MAIL
TO:NH DEPT OF REVENUE ADMINISTRATION
DOCUMENT PROCESSING DIVISION
PO BOX 637
CONCORD NH 03302-0637**Amount Of This Payment \$**Make check or money order payable to: **STATE OF NEW HAMPSHIRE.**
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